National Definition of Levels of Trauma Centers*

Level I

- 1. Regional resource hospital that is central to trauma care system.
- 2. Provides total care for every aspect of injury, from prevention through rehabilitation.
- 3. Maintains resources and personnel for patient care, education and research (usually in university-based teaching hospital).
- 4. Provides leadership in education, research and system planning to all hospitals caring for injured patients in the region.

Level II

- 1. Provides comprehensive trauma care, regardless of severity of the injury.
- 2. Might be most prevalent facility in a community and manage the majority of trauma patients or supplement the activity of a Level I trauma center.
- 3. Can be an academic institution or a public or private community facility located in an urban, suburban, or rural area.
- 4. Where no Level I Center exists, is responsible for education and system leadership.

Level III

- 1. Provides prompt assessment, resuscitation, emergency surgery, and stabilization and arrange transfer to a higher-level facility when necessary.
- 2. Maintains continuous general surgery coverage.
- 3. Has transfer agreements and standardized treatment protocols to plan for care of injured patients.
- 4. Might not be required in urban or suburban area with adequate Level I or II centers.

Level IV

- 1. Rural facility that supplements care within larger trauma system.
- 2. Provides initial evaluation and assessment of injured patients.
- 3. Must have 24-hour emergency coverage by a physician.
- 4. Has transfer agreements and a good working relationship with the nearest Level I, II or III Center.

State Definitions—Proposed by Trauma Task Force for 19 CSR 30-40.410 (1) (CC) Definitions and Abbreviations Relating To Trauma Centers

- **Trauma center** is a hospital that has been designated in accordance with the rules in this chapter to provide systematized medical and nursing care to trauma patients.
- Level I is the highest level of designation and functions as the resource center for the hospitals within that region.
- Level II is the next highest level of designation dealing with large volumes of serious trauma.
- Level III is the next level with limited resources.
- Level IV is the next level with very limited resources and provided access into the trauma system for rural regions of the state. Their function is to identify, stabilize and facilitate rapid transfer of the severely injured trauma patient to a higher level of care. Situations in which one shall consider transport of the severely injured trauma patient to a Level IV center (other than self-transport or walk-ins) include, but are not limited to, immediate life threatening situations such as cardiac or respiratory arrest. For the non-severely injured trauma patient, the Level IV center shall evaluate and transfer to higher level trauma center as needed.

^{*} Centers for Disease Control and Prevention. Guidelines for Field Triage of Injured Patients. Recommendations of the National Expert Panel on Field Triage. MMWR 2009; 58 (No. RR-1) pg 5.